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Jack  
51121

STATE OF OREGON  
WATER WELL REPORT  
(as required by ORS 537.765)

JUN - 9 1997

GRIBBLE WELL DRILLING INC.  
WATER RESOURCES DEPT.

(START CARD) # 80530

(1) OWNER:  
Name Edward + Kim Espinoza  
Address 23123 Hwy 62  
City Shady Cove State Ore Zip 97539  
Well Number L-11702  
SALEM, OREGON

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  
 Other

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 180 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	35	Bent	0	35	750 lbs
6"	35	180				

How was seal placed: Method  A  B  C  D  E  
 Other Poured Dry  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Casing	6"	+1	59	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner	4"	0	180	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 59'

(7) PERFORATIONS/SCREENS:

Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
140	180	10"	90	1/8		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
80+		180	1 hr.

Temperature of Water 55 Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Jackson Latitude N 42° 37' 89.2" Longitude W 122° 48' 45.6"  
Township 34S N or S. Range 1 W E or W. WM.  
Section 10 NW 1/4 NE 1/4  
Tax Lot 1100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Same as #1

(10) STATIC WATER LEVEL:  
22 ft. below land surface. Date 5/2/97  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 150'

From	To	Estimated Flow Rate	SWL
150	154	80+	22'

(12) WELL LOG:

Ground elevation \_\_\_\_\_

Material	From	To	SWL
Soil Brown	0	3	
Claystone Brown	3	23	
" Gray	23	47	
" Brown	47	50	
" Gray	50	82	
Basalt Gray	82	180	22

Date started 5/2/97 Completed 5/2/97

(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Material used and information reported above are true to my best knowledge and belief.  
WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.  
WWC Number 205  
Signed [Signature] Date 5-13-97